

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Nebraska

STANDARDS AND METHODS OF ASSURING HIGH QUALITY CARE

The following is a description of the standards established and the methods that will be used to assure that the medical and remedial care and services are of high quality.

1. Medical care and services are provided in accordance with the overall objectives of maintaining good health, preventing disease and disability, curing and mitigating disease, and rehabilitating the individual.
2. Plans for medical care are integrated with social planning.
3. Medical care and service must be provided within the licensure of the provider.
4. Insofar as possible, medical care and services must permit the recipient to exercise free choice in the selection of his/her provider.
5. The amount and kind of medical care and service is determined by the professional opinion of the practitioner.
6. Care for intraocular or chronic eye disease must be provided by a physician, M.D.
7. Medical care and services not provided by a licensed professional person must be recommended or prescribed by a licensed professional person.
8. Care in Homes for the Aged or Infirm or hospitals must be provided in a facility licensed to provide the required care.
9. The State Agency will establish processes of utilization review for each item of care and service included in the medical assistance program. The Division of Medical Services will be responsible for all utilization review plans and activities in the program.
10. Costs of other medical care and service is provided within reasonable maximums set by the Central Office related to the type of care.
11. NDSS provides a regular program of medical review (including medical evaluation of each patient's need for skilled nursing facility care and periodic review and reevaluation of recipients in intermediate care facilities as to the need for their placement) and in the case of individuals in mental hospitals, the need for care in a mental hospital, including, where applicable, evaluation of a written plan of care and a plan of rehabilitation prior to admissions. Periodic inspections will be made in all skilled nursing homes and mental institutions within the state by one or medical review teams (composed of physicians and other appropriate health and social service personnel) and in all intermediate care facilities (by review teams composed of R.N.'s and other appropriate health or social service personnel) of the care being provided in those nursing homes

and mental institutions, to persons receiving assistance under the State Plan with respect to each of the patients receiving that care. The review will determine the adequacy of the services available in particular nursing homes or institutions to meet the current health needs and promote the maximum physical well-being of patients receiving care in the homes or institutions; the necessity and desirability of the continued placement of such patients in such nursing homes or institutions; and the feasibility of meeting their health care needs through alternate institutional or noninstitutional services. Further, the team or teams will make full and complete reports of the findings resulting from the inspections together with any recommendations to the State Agency administering or supervising the administration of the State Plan.

12. Public or private skilled nursing facilities are licensed by the Nebraska Department of Health and in addition, meet the requirements for skilled nursing facilities as specified in 42 CFR 405, Subpart K.
13. Public or private intermediate care facilities are licensed by the Nebraska Department of Health and in addition meet the requirements for intermediate care facilities as specified in 42 CFR 442, Subparts E, F, G.

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